

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SIF		10-15-01
O.I.P.E. CLASSIFIER		10/	10/31
FORMALITY REVIEW	CTH	744	11-13-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ----- Rejected N ----- Non-elected
 ----- Allowed I ----- Interference
 (Through numeral) ----- Canceled A ----- Appeal
 ----- Restricted O ----- Objected

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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